



Belmont Permit Center PERMIT APPLICATION

Application No.: _____

Case Type:

Zoning of Property: _____

- | | | |
|---|---|--|
| <input type="checkbox"/> Design Review | <input type="checkbox"/> Tentative Tract Map | <input type="checkbox"/> Certificate of Appropriateness |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Façade Improvement Rebate | <input type="checkbox"/> General Plan Amendment |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Lot Line Adjustment | <input type="checkbox"/> Rezoning / Zoning Ordinance |
| <input type="checkbox"/> Floor Area Exception | <input type="checkbox"/> Grading Permit Approval | <input type="checkbox"/> Geologic Review |
| <input type="checkbox"/> City Code Exception | <input checked="" type="checkbox"/> Conceptual Development Plan | <input type="checkbox"/> Geo-Hazards Map Amendment |
| <input type="checkbox"/> Tentative Parcel Map | <input type="checkbox"/> Detailed Development Plan | <input type="checkbox"/> Subdivision Ordinance Exception |

Zoning Case Numbers: _____
(Staff Use Only)

Project Description: _____

Property Description:

Street Address: _____, Belmont, CA 94002

Assessors Parcel Number: _____

Property Area (sq. ft.): _____

Nearest Cross Street: _____

Applicant Information:

| | | |
|-------------|------------------------------|------------------------|
| Owner Name: | Telephone Number: () | Fax Number: () |
|-------------|------------------------------|------------------------|

| | |
|--|-----------------|
| Mailing Address, if different from Site Address: | E-mail Address: |
|--|-----------------|

| | | |
|---|------------------------------|------------------------|
| Applicant Name, if different from Property Owner: | Telephone Number: () | Fax Number: () |
|---|------------------------------|------------------------|

| | |
|----------------------------|-----------------|
| Applicant Mailing Address: | E-mail Address: |
|----------------------------|-----------------|

Submittal Authorization:

| | |
|---------------------|-------|
| Signature of Owner: | Date: |
|---------------------|-------|

| | |
|--|-------|
| Signature of Applicant, if different from Owner: | Date: |
|--|-------|

For Office Use Only: Fee Amount: _____

Check No. _____



Belmont Permit Center
PERMIT APPLICATION

Page 2 of 2

Street Address: _____

Application No.:

Site Preparation / Grading:

Number of Cubic Yards of Combined Cut and Fill:

_____ Cubic Yards

OR Check ☐ if less than 50 Cubic Yards

Depth of any Cut or Fill at Deepest Point:

_____ Feet

OR Check ☐ if less than 2 Feet

Surface Area to be Graded or Cleared:

_____ Square Feet

OR Check ☐ if less than 2000 Square Feet

Retaining Walls:

The Project Includes New, Rebuilt or Extended Retaining Walls:

☐ Yes

☐ No

Maximum Height of New, Rebuilt or Extended Retaining Walls:

_____ Feet

Floor Area:

Existing Floor Area of All Enclosed Structures:

_____ Square Feet

Proposed New Floor Area to be Added:

_____ Square Feet

Total Floor Area Resulting from Project:

_____ Square Feet

On-site Parking:

Existing Parking / Number of Spaces:

_____ Covered

_____ Uncovered

Proposed Additional or Lost Parking Spaces:

_____ Covered

_____ Uncovered

Total Parking Spaces Resulting from Project

_____ Covered

_____ Uncovered

Check any of the following items that apply to the project:

☐ Steep Terrain

☐ New Driveway / Curbcut

☐ New Signs

☐ Large Trees on Site

☐ New Water Service

☐ Redevelopment Area

☐ Historic Building on Site

☐ Construction Dumpster Required

CONCEPTUAL DEVELOPMENT PLAN



Belmont Permit Center SUPPLEMENTAL APPLICATION

Application No.: _____ (Office Use)

Address: _____

Date: _____

Project: _____

Tabulations:

Dwelling Units Per Acre (Residential Areas): _____

Floor Area Ratio (All Areas): _____

Maximum Height of Proposed Buildings: _____

Phasing:

Describe the schedule of any progression of development, including identification of major units to be phased (attached additional sheets, if necessary):

Relationship to Surrounding Uses:

Describe surrounding uses (north, east, south and west), both existing and as proposed in the Belmont General Plan. Identify any complementary or conflicting characteristics of project with current and planned surrounding uses (attached additional sheets, if necessary):

(Continued on Page 2)

Belmont Permit Center
CONCEPTUAL DEVELOPMENT PLAN

SUPPLEMENTAL APPLICATION

Page 2 of 3

Topographic Model:

The City Council or Planning Commission may require the submittal of a topographic model of the project and surrounding area. The model must be of an accurate scale, with the same scale used for both the vertical and the horizontal. Additional requirements for the model include:

- Final topography of the area after grading
- Street system
- Location and bulk of buildings and structures
- Lot design
- Parks, playgrounds, school sites and other open spaces
- Parking and loading areas
- Location of existing and proposed major landscaping

The applicant is prepared to submit such a model, if requested by the City Council or Planning Commission (indicate with applicant's initials):

Yes _____

No _____

Findings:

In order to approve a request for Conceptual Development Plan, the Planning Commission must determine that the project meets the six findings listed below. Please indicate how the project meets these findings:

- A. That the total development in each individual unit therein can exist as an independent unit capable of creating an environment of sustained desirability and stability or that adequate assurance will be provided that such objective will be attained; that the uses proposed will not be detrimental to present and potential surrounding uses, but will have a beneficial effect which could not be achieved under other zoning districts.

- B. That the streets and thoroughfares proposed are suitable and adequate to carry anticipated traffic and the density will not generate traffic in such amounts as to overload the street network outside the PD District.

(Continued on Page 3)

Belmont Permit Center
CONCEPTUAL DEVELOPMENT PLAN

SUPPLEMENTAL APPLICATION

Page 3 of 3

- C. That any proposed commercial development can be justified economically at the locations proposed, to provide for adequate commercial facilities of the types proposed.

- D. That the economic impact created by the PD District can be absorbed by the City (police and fire service, water supply, sewage disposal, etc.)

- E. That the proposed off-street parking is in substantial conformance with the provision of Section 8 of the Belmont Zoning Ordinance; that where an applicant's proposed off-street parking is less than that set forth by the standards of Section 8, circumstances are such that it would be a practical difficulty or create a physical hardship on the applicant for him to conform to the standards of Section 8.

- F. The proposed PD District is required to achieve the objectives of the Zoning Plan and the General Plan of the City.

CONCEPTUAL DEVELOPMENT PLAN



Belmont Permit Center APPLICATION CHECKLIST

Page 1 of 2

Address: _____

Date: _____

Project: _____

*Please review your project with the Planning Department
to determine if any additional items listed below are required.*

| | <u>Required</u> (by City) | <u>Submitted</u> (by applicant) | |
|----------------------------|-------------------------------------|------------------------------------|--|
| <u>Applications</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application Checklist (this form) |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Permit Application |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Supplemental Application |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Neighborhood Outreach Strategy |
| <u>Plans</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Site Plan (six copies) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Floor Plan (six copies) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Exterior Elevations (six copies) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Cross-sections (six copies) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Landscape Plan (six copies) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Property line survey |
| | <input type="checkbox"/> | <input type="checkbox"/> | Topographic survey map |
| | <input type="checkbox"/> | <input type="checkbox"/> | Tree Plan |
| | <input type="checkbox"/> | <input type="checkbox"/> | Grading plan |
| | <input type="checkbox"/> | <input type="checkbox"/> | Drainage plan |
| | <input type="checkbox"/> | <input type="checkbox"/> | Building sprinkler plan (four copies) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Driveway plan and profile |

Address: _____

| | <u>Required</u> (by City) | <u>Submitted</u> (by applicant) | |
|-------------------------------------|-------------------------------------|---|-------------------------------|
| <u>Technical Information</u> | <input type="checkbox"/> | <input type="checkbox"/> | Calculations for cut and fill |
| | <input type="checkbox"/> | <input type="checkbox"/> | Geotechnical report |
| | <input type="checkbox"/> | <input type="checkbox"/> | Engineering geology report |
| | <input type="checkbox"/> | <input type="checkbox"/> | Arborist report |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Preliminary title report |
| <u>Miscellaneous</u> | <input type="checkbox"/> | <input type="checkbox"/> | Color and material samples |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Photographs (eight sets) |
| | <input type="checkbox"/> | <input type="checkbox"/> | Economic Feasibility Analysis |
| <u>Noticing Information</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Noticing map |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Notice list |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Notice envelopes (post-paid) |
| <u>Fees and Deposits</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Application fee |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Environmental fee |
| | <input type="checkbox"/> | <input type="checkbox"/> | Tree Removal Fee |
| | <input type="checkbox"/> | <input type="checkbox"/> | Geologic Review Fee |
| | <input type="checkbox"/> | <input type="checkbox"/> | Other _____ |

Staff Assistant: _____ **Telephone:** _____ **Date:** _____

Applicant's Statement: As applicant for this project, I hereby certify that the materials listed as 'submitted' on this checklist are complete and accurate. If the City of Belmont determines that the materials are incomplete or inaccurate, I understand that the entire application may be deemed withdrawn and the application materials returned to me, with no further processing by the City.

Applicant's Name: _____ **Date:** _____

Applicant's Signature: _____